

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No.

Filing Date

10/574534

Application

CLAIMS

	AS FILED		AFTER AMENDMENT		AFTER AMENDMENT			AS FILED		AFTER AMENDMENT		AFTER AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.			↓	↑	↓	↓	TOTAL IND.			↓	↓	↓	
TOTAL DEP.			←	↑	←	←	TOTAL DEP.			←	←	←	
TOTAL CLAMS			██████████	██████████	██████████	██████████	TOTAL CLAMS			██████████	██████████	██████████	